



State of Washington
Application for a Water Right Permit

☒ SURFACE WATER ☐ GROUND WATER

☒ Permanent ☐ Temporary ☐ Short Term

CSRIA VRA Drought Permit

Follow the attached instructions. Attach additional sheets as necessary.

For Ecology Use
(Date Stamp)

JUL -3 18:43

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: DAN PARISEAU	Phone No: 509-669-3009	Other No:
Address: P.O. BOX 950		
City: BREWSTER	State: WA	Zip: 98812-0950
Email Address (optional):		

Contact Name (if different from above): MARY MCCREA	Phone No: 509-996-4121	Other No:
Relationship to Applicant: LEGAL REPRESENTATIVE		
Address: CASCADIA LAW GROUP, P.O. BOX 850		
City: WINTHROP	State: WA	Zip: 98862
Email Address (optional): mmccrea@cascadiaw.com		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: **IRRIGATION OF 150 ACRES**

Anticipated length of time to complete your project: **2015**

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input checked="" type="checkbox"/> Cubic Feet per Second (CFS) <input type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
IRRIGATION	3.33	600	APRIL 1 - OCT 31
(FROST PROTECTION)		26.4	MAR 1 - APR 30
TOTAL:			

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

For Ecology Use	APPLICATION NO: 34-35195	SEPA: Exempt/Not Exempt
Fee Paid: \$333.00	Check No: 5038	ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date 07-03-2008 By 50 OKAW0630

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source				B.) If Ground Water Source			
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input checked="" type="checkbox"/> River <input type="checkbox"/> Lake				<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____			
<input type="checkbox"/> Other: _____				_____			
Source Name: <u>COLUMBIA RIVER (WELLS POOL)</u>				Well diameter & depth: _____			
Tributary to: <u>PACIFIC OCEAN</u>				Number of proposed points of withdrawal: _____			
Number of proposed diversion points: <u>1</u>				Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				If available, attach Water Well Report and pump test.			
Well Tag ID No. _____				_____			
C.) Point of Diversion/Withdrawal – Legal Description							
Parcel No.	¼	¼	Section	Township	Range	County	
	<u>NE</u>	<u>NE</u>	<u>27</u>	<u>30N</u>	<u>25E</u>	<u>OKANOGAN</u>	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:							
<u>400</u> Feet (<input type="checkbox"/> North/ <input checked="" type="checkbox"/> South) and <u>400</u> feet (<input type="checkbox"/> East/ <input checked="" type="checkbox"/> West)							
from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input checked="" type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section <u>27</u> .							
Parcel No.	¼	¼	Section	Township	Range	County	
Lot(s)	Block(s)		Subdivision				
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:							
____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and ____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West)							
from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section ____							

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO
Provide the owner name(s), address, and phone number: _____

EASEMENT FROM DOUGLAS COUNTY PUD TO ACCESS
WELLS POOL.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

<u>SEE ATTACHED PERMIT S4-30205(A)P for</u>						
<u>LEGAL DESCRIPTION.</u>						
¼	¼	Section	Twp.	Range	County	Parcel No.

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO
Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NOIf yes, provide the water right and/or claim numbers: S4-30205(A)P

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): THERE IS A 20 HP LOB PUMP THAT DIVERTS WATER FROM THE COLUMBIA UP TO A SEALED CAN WITH A 100HP TURBINE PUMP. THE PRESSURIZED WATER IS CONVEYED THROUGH AN 18" STEEL PIPE TO THE 900' CONTOUR/ELEVATION AND FROM THERE THROUGH A 10" PVC MAINLINE TO THE ORCHARD. THERE IS ALSO A 10 HP BOOSTER PUMP WHERE THE LINE CROSSES HIGHWAY 17.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: _____	Present population to be served water: _____
Type of connections: _____ (e.g., home, recreational cabin)	Estimate future population to be served: _____ (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: _____	
Name of water system: _____	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____ _____ _____ _____ _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = 150 ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☒ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☒ NO

Do you have a controlling interest in a Family Farm Development Permit? ☒ YES ☐ NO

If yes, enter Permit No: S4-30205(A) P, S3-21139(A) P

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☐ YES ☒ NO

If you answered yes to any of the above questions, please describe: _____

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: TAKE HIWAY 97 NORTHEAST
OUT OF BREWSTER. EXIT RIGHT ONTO HIWAY 19 AND
GO APPROXIMATELY 1 MILE TO THE SITE.

Site Address: _____

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

MARY MCCREA

Print Name
(Applicant or authorized representative)

Mary E. McCre

Signature

6-30-08

Date

for

DAN PARISEAU

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

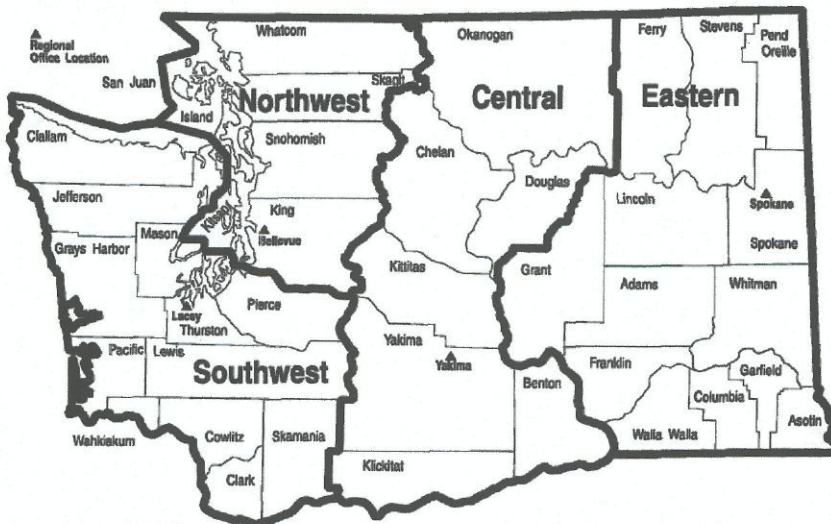
Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 5128
LACEY WA 98509-5128

Please check the region in which your proposed project is located.

☐ Southwest ☐ Northwest ☒ Central ☐ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300

Northwest Regional Office: 425-649-7000

Central Regional Office: 509-575-2490

Eastern Regional Office: 509-329-3400